| SECULARATION FOR UTILITY OF | Attorney Docket Numb | er 1008-A | | | | |
|---|--|---------------|--|--|--|--|
| DECLARATION FOR UTILITY OR DESIGN | First Named Inventor | MOSSMAN, Paul | | | | |
| PATENT APPLICATION | COMPLETE IF KNOWN | | | | | |
| (37 CFR 1.63) | Application Number | | | | | |
| Declaration Declaration | Filing Date | | | | | |
| Submitted OR Submitted after Initia | Group Art Unit | | | | | |
| with Initial Filling (surcharge (37 CFR 1.16 (e)) required) | Examiner Name | | | | | |
| As a below named inventor, I hereby declare that: | stated below next to my name | | | | | |
| My residence, post office address, and citizenship are as | one name is listed below) or an ork | | | | | |
| My residence, post office address, and citizenship are as | one name is listed below) or an originated and for which a patent is so | | | | | |
| My residence, post office address, and citizenship are at thelieve I am the original, first and sole inventor (if only names are listed below) of the subject matter which is clock the control of the subject matter which is clocked. | one name is listed below) or an origined and for which a patent is soo ND METHOD of the Invention) | | | | | |

| Prior Foreign Application | | Foreign Filing Date | Priority | Certified Copy Attached? | | |
|---------------------------|---------|---------------------|-------------|--------------------------|------|--|
| Number(s) | Country | (MM/DD/YYYY) | Not Claimed | YES | NO | |
| | | | 0000 | 0000 | 0000 | |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached here

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below Application Number(s) Filing Date (MM/DD/YYYY) unknown 11/27/2000 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 25 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed observed, insolver set the subject menter of each of the claims of this application in production in the present of the prior operation of the claims of this application. In the state of the prior operation of 35 U.S.C. 12, inchesting the days of the claim of the subject of the prior operation of the claim of the state of the stat

| and the national or PCF International filing date of this application. | | | | | | | | | | | | | | |
|---|----------------------|------------------------|--------|----------------------------|------------------------------------|---|---|---|------------|-------------------|-----------|------------------------|------|--|
| U.S. Parent Application or PCT Parent Number | | | | | Parent Filing Date (MM/DD/YYYY) | | | Parent Patent Number (ii applicable) | | | | | | |
| | | | | | , | | | | | (iii application) | | | | |
| Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. | | | | | | | | | | | | | | |
| As a named inventor. I hereby account the following registered practitioner(s) to prosecute this application and to transact all business in the Patent | | | | | | | | | | | | | | |
| and Trademark Office connected therewith: Customer Number Office | | | | | | Place Customer Number Bar Code Label have | | | | | | Code | | |
| Name | | | | R | Registration Number | | | Name | | | | Registration Number | | |
| Robert K. Feutlinske Norris M. Eades Edwin J. Gale | | | | 37,994 25,263 28,584 | | | John A. Baker Kimberley A. Lach Andrew J. Bauer-M | | | | | | | |
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| City | Otta | wa | | | | | | | | KIP | P 6N9 | | | |
| Country | CANA | | | | | | 144 | | | | 3) 237-00 | | | |
| I brothy declare that all statements made herein of my own horededge are true and that all statements made on information and belief are abselved to be true, and further that these statements were made with the browledge but that wildful false statements and the fils no on mode are pushfalable by files or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patient issued thereon. | | | | | | | | | | | | | | |
| Name of Sc | de or F | irst Invento | - | | | | ПАр | etitior | n has been | filed fo | rthis u | nsigned inve | ntor | |
| Given Name (first and middle (if anyl) | | | | | | | Family Name or Surname | | | | | | | |
| PAUL | | | | | | MOSSMAN | | | | | | | | |
| Inventor's Signature | | | | | | | | | Date | | | | | |
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| Additional | invento | re are being n | mad a | n the | | lamente | Addition | | | L | DTO | 00000 | | |